

AUGUST 2014 JUNIOR TENNIS CLINICS

Our Summer Tennis Programs are unlike other programs. We have developed innovative and proven techniques to provide professional, quality tennis instruction at family friendly prices. We focus on FUN and building and reinforcing proper fundamentals critical for continuing and advancing in the game.

The Program Director is Rick Gavornik, a USPTR certified tennis professional with over 25 years of teaching and coaching experience. Rick has taught juniors and adults from beginners to tournament level players including former HS State Champions and College All American Players. He currently teaches and coaches USTA ranked players in the area.

Classes are offered in August both **INDOORS** at the **air conditioned** Long Hill Community Center or **OUTDOORS** at Kantor Park (formerly called Riverside Park).

INDOORS: Long Hill Community Center, 1220 Valley Road, Stirling, NJ 07980
Offered: August 4-8th, August 11-15th, and August 18-22nd :

Ages 4-5	beginner/adv. beginners	Monday – Friday	10:45-11:45am	Cost: \$89 per week
Ages 6-8	beginner/adv. beginners	Monday – Friday	10:45-11:45am	Cost: \$89 per week
Ages 9 and up	beginner/adv. beginners	Monday – Friday	10:45-11:45am	Cost: \$89 per week
Ages 9 and up	low intermediates	Monday – Friday	12:00-1:00pm	Cost: \$115 per week

OUTDOORS: Kantor Park (formerly called Riverside Park) 915 Valley Road, Gillette, NJ 07933
Offered August 11-14th, August 18-21st and August 25-28th :

Ages 12 and up intermediate/adv intermediate Monday – Thursday 5:30-7pm Cost: \$139 per week
(Friday will be used as a rain make up if necessary)

All classes must have sufficient enrollment to run and are filled on a first come, first serve basis. Please make all checks payable to: **Skyline Tennis, LLC**, and mail to: **157 Clover Hill Road, Millington, NJ 07946**. Please feel free to contact Rick Gavornik if you have any questions at 908 647 1004 or rick.skylinetennis@gmail.com.

Skyline Tennis

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Registration Form

Name: _____ boy: _____ girl: _____ Age: _____ Telephone # _____

Address: _____ City: _____ Zip: _____ Email: _____

Parent Cell phone: _____ Level of Player: _____

Week you are registering for: _____ Time: _____ Amt Enclosed: _____

Signature of Parent/Guardian

As in any physical activity there is risk of injury. By signing this form, you represent the child is physically able to participate and you assume the risk of injury and release, discharge and/or otherwise indemnify Skyline Tennis, LLC, its employees, directors and representatives and Long Hill Township and the Long Hill Community Center, its employees and representatives of any claim of liability.